Attorney Docket No. 4661-0108PUS1

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: A PROCESS FOR ENHANCED RECOVERY OF CRUDE OIL FROM OIL WELLS USING NOVEL MICROBIAL Insert Title: the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following: Fill in Appropriate The specification was filed on\_ 01/12/2006 as United States Application Number Information -(if applicable) and/or and amended on For Use Without 07/14/2004 as PCT International Application Number PCT/IN2004/000206; the specification was filed on Specification (if applicable) Attached: and was amended on I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: **Priority Claimed** Prior Foreign Application(s) Insert Priority 892/DEL/2003 July 14, 2003 No Information (Month/Day/Year Filed) (Country) (Number) (if appropriate) (Month/Day/Year Filed) (Number) (Country) (Month/Day/Year Filed) (Number) (Country) (Month/Day/Year Filed) (Country) (Number) I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below. Insert Provisional Application(s): (Filing Date) (Application Number) (if any) (Filing Date) (Application Number) All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application: Date of Filing (Month/Day/Year) Insert Requested Application Number Country Information (if appropriate) I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, \$1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. Insert Prior U.S. Application(s): (Status - patented, pending, abandoned) (Application Number) (Filing Date) (if any) (Status - patented, pending, abandoned) (Application Number) (Filing Date)

(Rev. 05/2004)

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## CUSTOMER NO. 02292; (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

*					
Full Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
Insert Name of Inventor → Insert Date This	Banwari LAL	* Bancomi	17.03.2006		
Document is Signed	Residence (City, State & Country)		CITIZENSHIP		
Insert Residence	New Delhi, India	in all alian City Chair & Country	India		
Insert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country) The Energy Research Institute, Darbari Seth Block; India Habitat Centre, Lodhi Road; New Delhi-110 003; INDIA				
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Mula Ramajaneya Varaprasada REDDY	inventor's signature	DATE*		
	Residence (City, State & Country) New Delhi, India	1	CITIZENSHIP India		
	MAILING ADDRESS (Complete Street Address including City, State & Country) The Energy Research Institute, Darbari Seth Block; India Habitat Centre, Lodhi Road; New Delhi-110 003; INDIA				
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME Anil AGNIHOTRI	inventor's signature  Agmi Bolm	20 03 06		
	Residence (City, State & Country) Gujarat, India		CITIZENSHIP India		
	MAILING ADDRESS (Complete Street Address including City, State & Country) Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmedabad; Gujarat-380 005; INDIA				
Full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME Ashok KUMAR	INVENTOR'S SIGNATURE	DATE* March 20,06		
	Residence (City, State & Country) Gujarat, India		CITIZENSHIP India		
	MAILING ADDRESS (Complete Street Address including City, State & Country) Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmedabad; Gujarat-380 005; INDIA				
Full Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME  Munish Prasad SARBHAI	INVENTOR'S SIGNATURE	DATE* March 20,06		
	Residence (City, State & Country) Gujarat, India	1	CITIZENSHIP India		
	MAILING ADDRESS (Complete Street Address including City, State & Country) Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmedabad; Gujarat-380 005; INDIA				
Full Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME Nimmi SINGH	INVENTOR'S SIGNATURE	DATE* 20 3 \ 06		
	Residence (City, State & Country) Gujarat, India	70	CITIZENSHIP India		
	MAILING ADDRESS (Complete Street Address including City, State & Country) Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmedabad; Gujarat-380 005; INDIA				

<sup>\*</sup>DATE OF SIGNATURE

Attorney Docket No. 4661-0108PUS1

Full Name of Seventh	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		¿DATE*		
Inventor, if any: see above	Raj Karan KHURANA	× Majharan	!	20103/2006		
	Residence (City, State & Country)		CITIZENS	HIP		
	Gujarat, India	India				
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
	Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmeda					
	Gujarat-380 005; INDIA					
Full Name of Eight	GIVEN NAME/FAMILY NAME	INVENTOR'S, SIGNATURE	,	DATE*		
Inventor, if any: see above	Shinben Kishen KHAZANCHI	* SK Khezan	ich'	20/3/06		
	Residence (City, State & Country)		CITIZENS	HIP		
	Gujarat, India			India		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
	Institute of Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmed Gujarat-380 005; INDIA					
Full Name of Ninth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Tilak Ram MISRA	* (Xmum		20/3/06		
	Residence (City, State & Country)		CITIZENS	HIP		
	Gujarat, India			India		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
	Institute of Reservoir Studies, Oil and Natural (	Reservoir Studies, Oil and Natural Gas Corporation Limited; Chandekheda Campus, Ahmedabad;				
	Gujarat-380 005; INDIA					
Full Name of Tenth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Inventor, if any: see above		*				
	Residence (City, State & Country)	_	CITIZENS	HIP .		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
full Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Eleventh Inventor, if any: see above						
	Residence (City, State & Country)		CITIZENS	HIP		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
full Name of Twelfth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Inventor, if any: see above						
	Residence (City, State & Country)		CITIZENS	HIP		
· •	MAILING ADDRESS (Complete Street Address i	ncluding City, State & Country)				

<sup>\*</sup>DATE OF SIGNATURE